

MAY 10 2006

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## FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
COMMISSIONER FOR PATENTS	Robert H. Resis
COMPANY:	DATE:
USPTO	May 10, 2006
FAX NO.:	TOTAL NO. OF PAGES: (Including cover sheet)
(571) 273-8300	3
YOUR REFERENCE NO.:	OUR REFERENCE (C/M) NO.:
10/061,036	006005.00001
RE:	In re: Simonson, et al. Appln. No. 10/061,036 Filed: January 30, 2002 For: Rapid Lateral Flow Assay for Determining Exposure to Mycobacterium Tuberculosis and Other Mycobacteria

## OFFICIAL FAX

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Request for Withdrawal as Attorney

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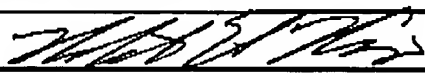
Approved for use through 07/31/2008. OMB 0561-0031

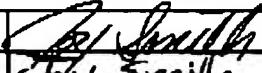
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/061,036	
	Filing Date	01/30/2002 <b>RECEIVED</b>	
	First Named Inventor	Lloyd Simonson <b>CENTRAL FAX CENTER</b>	
	Art Unit	1645 <b>MAY 10 2006</b>	
	Examiner Name	Swartz, Rodney P.	
Total Number of Pages In This Submission	3	Attorney Docket Number	006005.00001

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Req. for Withdrawal as Attorney or Agent and Change of Correspondence Address Fax Cover Sheet
<b>Remarks</b> Commissioner of Patents is hereby authorized to charge any additional fees or credit any overpayments to deposit account 19-0733.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	Robert H. Resis		
Date	05/10/2006	Reg. No.	32,168

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail-in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Robert H. Resis	Date
		5-10-06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAY 10 2006

PTO/SB/83 (09-03)

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
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CORRESPONDENCE ADDRESS**

Application Number	10/061,036
Filing Date	01/30/2002
First Named Inventor	Lloyd Simonson
Art Unit	1645
Examiner Name	Swartz, Rodney P.
Attorney Docket Number	006005.00001

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registrations numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **22908**

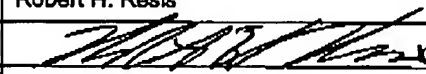
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2. ☐ Change the correspondence address and direct all future correspondence to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Joseph Hembly, Jr., Intellectual Property Counsel - Registration No. 42,652				
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Name	Robert H. Resis				
Signature			Registration No.	32,168	
Date	05/10/2006		Telephone No.	(312) 463-5000	

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